



SUSANA MARTINEZ  
Governor

JOHN A. SANCHEZ  
Lt. Governor

## NEW MEXICO ENVIRONMENT DEPARTMENT

Harold Runnels Building  
1190 South St. Francis Drive (87505)  
P.O. Box 5469, Santa Fe, NM 87502-5469  
Phone (505) 827-0187 Fax (505) 827-0160  
[www.env.nm.gov](http://www.env.nm.gov)



BUTCH TONGATE  
Cabinet Secretary

J. C. BORREGO  
Deputy Secretary

### **Certified Mail – Return Receipt Requested**

December 15, 2017

Mr. Armando Reyna, Operating/Managing Member  
American Redi Mix, LLC  
1860 Copper Loop  
Las Cruces, NM 88005

**Re: American Redi Mix, LLC; Copper Loop Batch Plant; MSGP SIC 3273; NPDES Compliance Evaluation Inspection; NPDES NMR053017; November 15 & 17, 2017**

Dear Mr. Reyna:

Enclosed please find a copy of the report worksheet for the referenced inspection that the New Mexico Environment Department (NMED) conducted at your facility on behalf of the U.S. Environmental Protection Agency (USEPA). This inspection report will be sent to the USEPA in Dallas for their review. These inspections are used by USEPA to determine compliance with the National Pollutant Discharge Elimination System (NPDES) permitting program in accordance with requirements of the federal Clean Water Act.

Further explanations and problems noted during this inspection are discussed on the completed form and worksheet of this inspection report. You are encouraged to review the inspection report, required to correct any problems noted during the inspection, and advised to modify your operational and/or administrative procedures, as appropriate. If you have comments on or concerns with the basis for the findings in the NMED inspection report, please contact us (see the address below) in writing within 30 days from the date of this letter. Further, you are encouraged to notify in writing both the USEPA and NMED regarding modifications and compliance schedules at the addresses below:

Robert Houston, Section Chief  
NPDES Enforcement Stormwater  
Environmental Protection Agency, Region 6  
NPDES Enforcement Branch (6EN-WS)  
1445 Ross Avenue, Suite 1200  
Dallas, Texas 75202-2733

Sarah Holcomb  
Program Manager  
New Mexico Environment Department  
Surface Water Quality Bureau (N2050)  
Point Source Regulation Section  
P.O. Box 5469  
Santa Fe, New Mexico 87502

If you have any questions about this inspection report, please contact Erin Trujillo at 505-827-0418 or at [erin.trujillo@state.nm.us](mailto:erin.trujillo@state.nm.us).

**Mr. Reyna, NMR053017, Copper Loop Batch Plant**  
**December 15, 2017**  
**Page 2 of 2**

Sincerely,

*/s/Sarah Holcomb*

Sarah Holcomb  
Program Manager  
Point Source Regulation Section  
Surface Water Quality Bureau

cc: Carol Peters-Wagnon, USEPA (6EN-WM) by e-mail  
David Long, USEPA (6EN-WM) by e-mail  
David Esparza, USEPA (6EN-WM) by e-mail  
Amy Andrews, USEPA (6EN-WM) by e-mail  
Robert Houston, USEPA (6EN-WS)  
Darlene Whittten-Hill, USEPA (6EN) by e-mail  
Michael Kesler, NMED District III by e-mail



Form Approved  
OMB No. 2040-0003  
Approval Expires 7-31-85

## NPDES Compliance Inspection Report

### Section A: National Data System Coding

Transaction Code	NPDES	yr/mo/day	Inspec. Type	Inspector	Fac Type
1 N 2 5 3 N M R 0 5 3 0 1 7 11 12 1 7 1 1 1 5 17 18 ~ 19 S 20 2					
Remarks					
C O N C E T E B A T C H P L A N T					
Inspection Work Days	Facility Evaluation Rating	BI	QA	Reserved	
67 69	70 2	71 N	72 N	73 74 75	80

### Section B: Facility Data

Name and Location of Facility Inspected (For industrial users discharging to POTW, also include POTW name and NPDES permit number)	Entry Time /Date ~ 1520 hours / 11/15/2017 ~ 0800 hours / 11/17/2017	Permit Effective Date 2015 MSGP August 12, 2015
American Redi-Mix, LLC, Copper Loop Batch Plant, 1860 Copper Loop, Las Cruces, New Mexico 88005. Dona Ana County	Exit Time/Date ~ 1650 hours / 11/15/2017 ~ 0840 hours / 11/17/2017	Permit Expiration Date 2015 MSGP June 4, 2020
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s) -Amy Castillo, American Redi-Mix, LLC, Office Manager, 575-528-0600 -Armando Reyna, American Redi-Mix, LLC, Managing Member, 575-528-0600	Other Facility Data <b>Entrance</b> Latitude: 32.303292° Longitude: -106.807429°	
Name, Address of Responsible Official/Title/Phone and Fax Number Armando Reyna, American Redi-Mix, LLC / 1860 Copper Loop, Las Cruces, New Mexico 88005 / Managing/Operating Member / 575-528-0600	Yes <input checked="" type="checkbox"/> Contacted <input type="checkbox"/> No	SIC 3273 Ready-Mixed Concrete; MSGP Sector E, Sub-Sector E2

### Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

M Permit	N Flow Measurement	N Operations & Maintenance	N CSO/SSO
U Records/Reports	U Self-Monitoring Program	N Sludge Handling/Disposal	N Pollution Prevention
M Facility Site Review	N Compliance Schedules	N Pretreatment	N Multimedia
N Effluent/Receiving Waters	N Laboratory	M Storm Water	N Other:

### Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

See attached worksheet report (summary of findings on pages 17 and 18), monitoring summary information, and photo documentation.

Name(s) and Signature(s) of Inspector(s) Erin S. Trujillo /s/Erin S. Trujillo	Agency/Office/Telephone/Fax NMED / SWQB / 505-827-0418	Date 12/15/2017
Signature of Management QA Reviewer Jennifer Foote /s/Jennifer Foote	Agency/Office/Phone and Fax Numbers NMED / SWQB / 505-827-0596	Date 12/15/2017

## NPDES Industrial Storm Water Worksheet (MSGP)

National Database Information		General	
Inspection Type	Compliance Evaluation Inspection	Inspector Name	Erin S. Trujillo
NPDES ID Number	NMR053017	Telephone	505-827-0418
Inspection Date	11/15/2017 11/17/2017	Entry Time	~ 1530 hours / 11/15/2017 ~ 0800 hours / 11/17/2017
Inspector Type (circle one)	EPA <span style="border: 1px solid black; padding: 0 5px;">State</span> EPA Oversight	Exit Time	~ 1630 hours / 11/15/2017 ~ 0840 hours / 11/17/2017
Facility Sector/ SIC/Activity Code	MSGP Sector E, Subsector E2 / SIC 3273 (Ready-Mixed Concrete)	Signature	/s/Erin S. Trujillo

Facility Location Information				
Name/Location/ Mailing Address	American Redi-Mix, LLC, Copper Loop Batch Plant, 1860 Copper Loop, Las Cruces, New Mexico 88007			
GPS Coordinates	Latitude	32.303292°	Longitude	-106.807429°
Receiving Water(s)	Stormwater discharges to the east-southeast to Las Cruces Urbanized Area Small Municipal Separate Storm Sewer System (sMS4), which includes drop inlets to storm sewers along North 17 <sup>th</sup> Street approximately 0.25 miles east and West Amador Avenue approximately 0.4 miles south of the facility that convey to Burn Lake, which is a floodwater catchment for stormwater that may be pumped to Mesilla Drain and/or directly to Mesilla Drain, which is an irrigation drain with a potential inflow (Wasteway No. 18 below NM-28 Bridge), thence to Del Rio Drain (inflow at Levee Road near Vado located over 15 miles south of Las Cruces), thence to Rio Grande in 20.6.4.101 NMAC.			

Contact Information		
	Name(s)	Telephone
Name(s) and Role(s) of All Parties Meeting the Definition of Operator	American Redi-Mix, LLC (ARM)	505-528-0600
Facility Contact	Amy Castillo, ARM Office Manager	See above
Authorized Official(s)	Armando Reyna, ARM Managing Member	See above

Basic Permit Information			Basic SWPPP Information		
Permit Coverage	<input checked="" type="checkbox"/> Y	N	SWPPP Prepared & Available	<input checked="" type="checkbox"/> Y	N
Permit Type	<span style="border: 1px solid black; padding: 0 5px;">General</span> 2015 MSGP	Individual	SWPPP Contents Satisfactory	Y	<span style="border: 1px solid black; padding: 0 5px;">N</span>
Operational Date	2009		SWPPP Implementation Satisfactory	Y	<span style="border: 1px solid black; padding: 0 5px;">N</span>
NOI/Application Date	09/03/2015		SWPPP Date	09/03/2015	
If applicable, is no exposure certification on file?	Y N	Not Applicable	<i>Intentionally left blank</i>		

## NPDES Industrial Storm Water Worksheet (MSGP)

SWPPP Review			
<u>General</u>	Notes:		
Was the SWPPP completed prior to NOI submission?	Y	<input checked="" type="checkbox"/> N	SWPPP updates were not complete as discussed below. Portions of the SWPPP dated June 2010 prepared by Martich Professional Services, PLLC, El Paso, Texas were updated (e.g., handwritten annotations regarding ESA and Historic Preservation Act Documentation) prior to the NOI submission.
Copy of the NOI and acknowledgment letter from EPA?	<input checked="" type="checkbox"/> Y	N	
Copy of the permit language?	<input checked="" type="checkbox"/> Y	N	
Have copies of inspection reports/all other documentation been retained as part of the SWPPP for 3 years from date permit coverage expires?	<input checked="" type="checkbox"/> Y	N	
Does the SWPPP contain a signed/certified statement indicating that the site is inactive and unstaffed, and that there are no industrial materials or activities exposed to precipitation, in accordance with the substantive requirements in 40 CFR 122.26(g)(4)(iii)? Applicable to: <ul style="list-style-type: none"> <li>Routine facility inspection (3.1.1)</li> <li>Quarterly visual assessment (3.2.3)</li> <li>Benchmark monitoring (6.2.1.3).</li> </ul>	Y	N	Not applicable
Does the SWPPP include copies of relevant parts of other documents (e.g., SPCC) referenced in the SWPPP?	Y	N	Not applicable
Does the SWPPP include documentation to support eligibility under the Endangered Species Act?	<input checked="" type="checkbox"/> Y	N	Criterion A (No listed species or critical habitat in action area).
Does the SWPPP include documentation to support eligibility under the Historic Preservation Act?	<input checked="" type="checkbox"/> Y	N	
Does the SWPPP include documentation to support eligibility under NEPA (New Source)?	Y	N	Not Applicable. New Source Performance Standards are applicable to runoff from material storage piles at cement manufacturing facilities (40 CFR Part 411, Subpart C, 2/20/74).
Did all "operators" sign/certify the SWPPP?	Y	<input checked="" type="checkbox"/> N	Y = Signed, N = Updated Certification
Is the storm water pollution prevention team identified (name or title)?	Y	<input checked="" type="checkbox"/> N	Team (names/titles) were not updated.
Are the storm water pollution prevention team's responsibilities identified?	Y	<input checked="" type="checkbox"/> N	No / Not documented. Team responsibilities may need to be updated.

## NPDES Industrial Storm Water Worksheet (MSGP)

Site Description			Notes:
SWPPP provides a description of the facility's industrial activities?	<input checked="" type="checkbox"/> Y	N	
Is there a general location map (e.g., USGS quadrangle map) with enough detail to identify the location of the facility and all receiving waters for storm water discharges?	<input checked="" type="checkbox"/> Y	N	
Is there a site specific site map?	<input checked="" type="checkbox"/> Y	N	
Does the site map contain the size of the property in acres?	<input checked="" type="checkbox"/> Y	N	2.1 acres
Does the site map contain the location and extent of significant structures and impervious surfaces?	<input checked="" type="checkbox"/> Y	N	
Does the site map contain directions of storm water flow (indicated by arrows)?	Y	<input checked="" type="checkbox"/> N	No / Not updated. A wall had been constructed along the southern property boundary. Run-off arrows on site map were no longer accurate.
Does the site map contain locations of all existing structural control measures?	<input checked="" type="checkbox"/> Y	N	
Does the site map contain locations of all receiving waters in the immediate vicinity of the facility, indicating if any of the waters are impaired, and if so, whether the waters have TMDLs established for them?	<input checked="" type="checkbox"/> Y	N	
Does the site map contain locations of all storm water conveyances including ditches, pipes and swales?	<input checked="" type="checkbox"/> Y	N	
Does the site map contain locations of all potential pollutants and significant materials identified under Part 5.2.2?	<input checked="" type="checkbox"/> Y	N	
Does the site map contain locations where significant spills or leaks identified under Part 5.2.3.3 have occurred?	Y	N	Not applicable
Does the site map contain locations of all storm water monitoring points?	Y	<input checked="" type="checkbox"/> N	No / Not updated. One of the two outfalls described in SWPPP was eliminated by the construction of a wall along the southern portion of the property prior to operator's submittal of the 2015 NOI.
Does the site map contain locations of storm water inlets and outfalls, with a unique identification (e.g., 001, 002) for each outfall and if substantially identical?	<input checked="" type="checkbox"/> Y	N	.
Does the site map contain municipal separate storm sewers and where the facility discharges to them?	Y	<input checked="" type="checkbox"/> N	No / Not updated. Map did not show or indicate flow direction from Copper Loop to drop inlets on 17 <sup>th</sup> street.
Does the site map contain locations and descriptions of all non-storm water discharges?	<input checked="" type="checkbox"/> Y	N	Y = Discharge. An outside faucet was observed on the southside of the facility office/shop building. Site map did not indicate source or location of this possible non-storm water.

## NPDES Industrial Storm Water Worksheet (MSGP)

<u>Site Description</u>			<b>Notes:</b>
<p>Does the site map contain locations of the following activities where these activities are exposed to precipitation?</p> <ul style="list-style-type: none"> <li>• Fueling stations</li> <li>• Vehicle and equipment maintenance and/or cleaning areas</li> <li>• Loading/unloading areas</li> <li>• Locations used for the treatment, storage or disposal of wastes</li> <li>• Liquid storage tanks</li> <li>• Processing and storage areas</li> <li>• Immediate access roads and rail lines used or travelled by carriers of raw materials, manufactured products, waste materials, or by-products used or created by the facility</li> <li>• Transfer areas for substances in bulk</li> <li>• Machinery</li> </ul>	<input checked="" type="checkbox"/>	N	
Does the site map contain locations and sources of run-on to the site from adjacent property that contains significant quantities of pollutants?	Y	N	Not applicable
Does the SWPPP document areas at the facility where industrial materials or activities are exposed to storm water and from which allowable non-storm water discharges are released?	<input checked="" type="checkbox"/>	N	
Does the SWPPP include a list of the industrial activities exposed to storm water (e.g., material storage; equipment fueling, maintenance, and cleaning; cutting steel beams)?	<input checked="" type="checkbox"/>	N	
Does the SWPPP include a list of pollutants and/or pollutant constituents associated with each identified activity?	<input checked="" type="checkbox"/>	N	
Does the SWPPP include documentation of where spills and leaks occurred for three years prior to the preparation of the SWPPP?	<input checked="" type="checkbox"/>	N	Yes / Not applicable (no spills described)

## NPDES Industrial Storm Water Worksheet (MSGP)

<u>Site Description</u>		Notes:	
Does the SWPPP include a non-storm water discharge evaluation in the SWPPP? Does it include: <ul style="list-style-type: none"> <li>Date</li> <li>Description of evaluation criteria</li> <li>List of the outfalls or onsite drainage points directly observed</li> <li>Different types of non-storm water discharges and source locations</li> <li>Actions taken such as a list of control measures for elimination.</li> </ul>	<input checked="" type="checkbox"/> Y	N	
Does salt storage occur at this facility?	Y	N	N / No salt storage / Not applicable
Does the SWPPP include a summary of storm water sampling data for the previous permit term?	Y	<input checked="" type="checkbox"/> N	
<u>Controls to Reduce Pollutants</u>		Notes:	
Does the SWPPP include documentation of the location and type of control measures at the facility to comply with the requirements in Part 2?	<input checked="" type="checkbox"/> Y	N	
Does the SWPPP include documentation that selection and design of control measures were based on a consideration of the practices and procedures in Part 2.1.1?	<input checked="" type="checkbox"/> Y	N	
Does the SWPPP include measures to minimize the exposure of manufacturing, processing, and material storage areas (including loading and unloading, storage, disposal, cleaning, maintenance, and fueling operations) to rain, snow, snowmelt, and runoff by either locating these industrial materials and activities inside or protecting them with storm resistant coverings?	<input checked="" type="checkbox"/> Y	N	
Does the SWPPP include good housekeeping measures (e.g., keeping all exposed areas that are potential sources of pollutants clean, using such measures as sweeping at regular intervals, keeping materials orderly and labeled, and storing materials in appropriate containers)?	<input checked="" type="checkbox"/> Y	N	



## NPDES Industrial Storm Water Worksheet (MSGP)

<b><u>Controls to Reduce Pollutants</u></b>			<b>Notes:</b>
Does the SWPPP include a schedule for pickup and disposal of wastes and routine inspections of tanks and drums?	<input checked="" type="checkbox"/> Y	N	
Does the SWPPP include preventative maintenance procedures, including regular inspections, testing, maintenance, and repair of all industrial equipment and systems, and control measures, and back-up practices should a runoff event occur while a control measure is off-line?	<input checked="" type="checkbox"/> Y	N	
Does the SWPPP include a schedule for preventative maintenance procedures?	<input checked="" type="checkbox"/> Y	N	
Does the SWPPP include procedures for minimizing the potential for leaks, spills and other releases that may be exposed to storm water and develop plans for effective response to such spills if or when they occur?	<input checked="" type="checkbox"/> Y	N	
Does the facility implement procedures for plainly labeling containers (e.g., "Used Oil," "Spent Solvents," "Fertilizers and Pesticides," etc.) that could be susceptible to spillage or leakage to encourage proper handling and facilitate rapid response if spills or leaks occur?	<input checked="" type="checkbox"/> Y	N	Y = Described in SWPPP
Does the facility implement preventative measures such as barriers between material storage and traffic areas, secondary containment provisions, and procedures for material storage and handling?	<input checked="" type="checkbox"/> Y	N	Y = Described in SWPPP
Does the facility implement procedures for expeditiously stopping, containing, and cleaning up leaks, spills, and other releases?	<input checked="" type="checkbox"/> Y	N	Y = Described in SWPPP
Does the facility train employees who may cause, detect, or respond to a spill or leak in these procedures and have necessary spill response equipment available?	Y	<input checked="" type="checkbox"/> N	Y = Described in SWPPP N = No / Not updated / Not documented
Does the facility document and follow procedures for notification of appropriate facility personnel, emergency response agencies, and regulatory agencies?	<input checked="" type="checkbox"/> Y	N	Y = Described in SWPPP

## NPDES Industrial Storm Water Worksheet (MSGP)

<b><u>Controls to Reduce Pollutants</u></b>			<b>Notes:</b>
Does the SWPPP document erosion and sediment controls?	<input checked="" type="checkbox"/> Y	N	
Does the facility stabilize exposed areas and contain runoff using structural and/or non-structural control measures to minimize onsite erosion and sedimentation, and the resulting discharge of pollutants?	<input checked="" type="checkbox"/> Y	N	
Does the facility place flow velocity dissipation devices at discharge locations and within outfall channels where necessary to reduce erosion and/or settle out pollutants?	<input checked="" type="checkbox"/> Y	N	
If the facility stores salt at this facility, are the piles enclosed or covered? Does the facility implement appropriate measures (e.g., good housekeeping, diversions, containment) to minimize exposure resulting from adding to or removing materials from the pile?	Y	N	Not applicable / No salt storage
Employee Training – is there a schedule for regular (at least annually) employee training?	<input checked="" type="checkbox"/> Y	N	Y = Described in SWPPP
Does training cover both the specific control measures used to achieve the effluent limits in Part 2 and monitoring, inspection, planning, reporting, and documentation requirements in other parts of the permit?	<input checked="" type="checkbox"/> Y	N	Y = Described in SWPPP
Does the facility ensure that waste, garbage, and floatable debris are not discharged to receiving waters by keeping exposed areas free of such materials or by intercepting them before they are discharged?	<input checked="" type="checkbox"/> Y	N	Y = Described in SWPPP
Does the facility minimize generation of dust and off-site tracking of raw, final, or waste materials?	<input checked="" type="checkbox"/> Y	N	Y = Described in SWPPP
Has the facility eliminated non-storm water discharges not authorized by an NPDES permit?	<input checked="" type="checkbox"/> Y	N	Y = Described and documented in SWPPP

## NPDES Industrial Storm Water Worksheet (MSGP)

### Notes on SWPPP Review

**Introduction:** On November 15, 2017, Erin S. Trujillo, New Mexico Environment Department (NMED) Surface Water Quality Bureau (SWQB) conducted on behalf of United States Environmental Protection Agency an unannounced National Pollutant Discharge Elimination System (NPDES) Compliance Evaluation Inspection (CEI) at the American Redi-Mix, LLC Copper Loop Batch Plant. Permittee representative and facility information was summarized on USEPA Form 3560 and Page 1 of this Worksheet

Upon entrance, Ms. Trujillo made introductions, explained the purpose of the inspection and presented credentials to Mr. Reyna. Ms. Trujillo and Mr. Reyna conducted a tour of the facility. Ms. Trujillo arranged with Mr. Reyna to review records that were not readily available or located, and to conduct an exit interview to provide preliminary findings of this CEI with the facility's stormwater team, both Ms. Castillo and Mr. Reyna, on November 17, 2017.

**Site Description / Previous 2008 MSGP Coverage:** American Redi-Mix, LLC (ARM) is a 2.1-acre concrete batch plant. There are dedicated areas for rock and sand storage piles, a rock washing area, cement silos, acid dispensing, wash out area and admixture area. Permittee representative stated that there was no vehicle fueling on site. The facility was operated by other owners prior to ARM. ARM submitted a Notice of Intent (NOI) to obtain permit coverage under the 2008 MSGP for the Copper Loop Batch Plant Facility (NPDES Tracking ID NMR05H405) on 09/13/2010. A NPDES CEI was conducted on July 26, 2011 and the report is available at <https://www.env.nm.gov/swqb/NPDES/Inspections/NMR05H405-20110726.pdf>. ARM submitted a second Notice of Intent (NOI) to obtain permit coverage under the 2008 MSGP for the Copper Loop Batch Plant Facility (NPDES Tracking ID NMR05HU60) on 09/17/2013. USEPA's Enforcement and Compliance History Online (ECHO) public website at <https://echo.epa.gov/> shows the facility approximately 0.10 miles east of the actual location as follows:

-NMR05H405, American Redi-Mix, LLC, 1860 Copper Loop, Las Cruces, NM 88007  
FRS ID: 110044263793, Latitude: 32.304015, Longitude: -106.806061;

-NMR05HU60 (Unable to find NPDES Tracking ID in USEPA ECHO); and

-NMR053017, Copper Loop Batch Plant, 1860 Copper Loop, Las Cruces, NM 88007  
FRS ID: 110064780465, Latitude: 32.304015, Longitude: -106.806061

**Reported Aluminum Monitoring under 2008 MSGP:** Aluminum monitoring conducted and reported under NMR05H405 under the 2008 MSGP detected Total Aluminum in Outfall 001 (1.11 mg/L, 0.15 mg/L, 0.52 mg/L, 0.2 mg/L, 2.28 mg/L) and Outfall 002 (0.64 mg/L, 0.15 mg/L, 1.38 mg/L, 0.2 mg/L, 2.04 mg/L). Current State of New Mexico Water Quality Standards Numeric Criteria (in the stream or surface water) for Total Recoverable Aluminum are based on dissolved hardness of the receiving water. For example, the Acute Aquatic life criteria is 0.512 milligrams per liter (mg/L) and Chronic Criteria is 0.205 mg/L based on a dissolved hardness concentration of 25 mg/L as CaCO<sub>3</sub>.

## NPDES Industrial Storm Water Worksheet (MSGP)

Inspections (Part 4)			
<u>General</u>	Notes:		
<b>Routine Facility Inspections</b>			
Are routine facility inspections conducted at least quarterly while facility operating?	Y	<input checked="" type="checkbox"/> N	
Are inspections documented, including: <ul style="list-style-type: none"> <li>Date and time</li> <li>Name and signature of inspector</li> <li>Weather information and a description of discharge occurring at the time of the inspection</li> <li>Previously unidentified discharges from site</li> <li>Control measures needing maintenance or repairs</li> <li>Failed control measures that need replacement</li> <li>Incidents of noncompliance observed</li> <li>Additional control measures needed.</li> </ul>	Y	<input checked="" type="checkbox"/> N	
Exceptions, including (see 3.1.1): <ul style="list-style-type: none"> <li>Inactive and unstaffed sites</li> </ul>	Y	N	Not applicable
<b>Quarterly Visual Assessment</b>			
Are quarterly visual assessments conducted?	<input checked="" type="checkbox"/> Y	N	
Does the assessment consist of a sample collected: <ul style="list-style-type: none"> <li>Within the first 30 minutes of discharge</li> <li>On discharges that occur at least 72 hours (3 days) from the previous discharge</li> <li>Collected in a clean, clear glass or plastic container.</li> </ul>	<input checked="" type="checkbox"/> Y	N	

## NPDES Industrial Storm Water Worksheet (MSGP)

Inspections			
Are assessments documented, including: <ul style="list-style-type: none"> <li>Sample location</li> <li>Sample collection date/time &amp; visual assessment date/time</li> <li>Personnel collecting sample &amp; performing assessment and their signature</li> <li>Nature of the discharge (runoff or snowmelt)</li> <li>Results of observations (including color, odor, clarity, floating solids, settled solids, suspended solids, foam, oil sheen and other obvious indicators)</li> <li>Probable sources of contamination</li> <li>If applicable, reason for not taking samples within 1<sup>st</sup> 30 minutes.</li> </ul>	<input checked="" type="checkbox"/>	N	
Exceptions, including (see 3.2.3): <ul style="list-style-type: none"> <li>Adverse weather conditions</li> <li>Climates with irregular storm water runoff</li> <li>Areas subject to snow</li> <li>Substantially identical outfalls (per 5.2.5.3)</li> <li>Inactive and unstaffed sites.</li> </ul>	<input checked="" type="checkbox"/>	N	<b>Additional Information:</b> SWPPP includes discussion on measurable storm events and record keeping. Alternative quarterly monitoring intervals for visual assessments and benchmark monitoring (June 1 thru July 31, August 1 thru August 31, September 1 thru September 30 and October thru December 31) were based on a table in the SWPPP showing Mean Monthly Precipitation totals.

Monitoring (Part 6)			
<u>General</u>			Notes:
Does the SWPPP contain a procedure for conducting sector (and co-located) specific benchmark monitoring?	<input checked="" type="checkbox"/>	N	
Does the SWPPP contain procedures for conducting effluent limitations guidelines monitoring?	Y	<input checked="" type="checkbox"/>	N = Procedures would not meet USEPA approved method for pH, including holding times.
Does the SWPPP contain a procedure for other monitoring (state or tribal specific; impaired waters; other as required)	Y	<input checked="" type="checkbox"/>	
Are samples analyzed in accordance with 40 CFR Part 136 methods?	<input checked="" type="checkbox"/>	N	No annual pH monitoring reported.

## NPDES Industrial Storm Water Worksheet (MSGP)

<b>Benchmark Monitoring</b>			
<p>Does the monitoring consist of a sample collected:</p> <ul style="list-style-type: none"> <li>• Within the first 30 minutes of discharge</li> <li>• On discharges that occur at least 72 hours (3 days) from the previous discharge</li> <li>• Document the date and duration (in hours) of the rainfall event, rainfall total (snow - date only) for that rainfall</li> <li>• Prior to commingling.</li> </ul>	<input checked="" type="checkbox"/> Y	N	
Is monitoring conducted during each of the first four full quarterly (calendar) monitoring periods following permit coverage?	Y	<input checked="" type="checkbox"/> N	
Is the average of the first four quarterly samples < the parameter benchmark?	Y	N	Four samples have not been collected
<p>Is the average of the first four quarterly samples &gt; the parameter benchmark?</p> <ul style="list-style-type: none"> <li>• Make the necessary modifications</li> <li>• Continue quarterly monitoring</li> <li>• Determine and document that no further pollutant reductions are technologically available and economically practicable and achievable, continue monitoring once per year, notify EPA</li> <li>• Natural background pollutant level documentation</li> </ul>	Y	N	Four samples have not been collected
<p>Exceptions, including (see 6.1.5, 6.1.6 &amp; 6.2.1.3):</p> <ul style="list-style-type: none"> <li>• Adverse weather conditions</li> <li>• Climates with irregular storm water runoff</li> <li>• Snowmelt</li> <li>• Substantially identical outfalls (per 5.1.5.2)</li> <li>• Inactive and unstaffed sites.</li> </ul>	<input checked="" type="checkbox"/> Y	N	See notes above on alternative schedule.
<b>Effluent Limitations Monitoring (Sector A, C, D, E, J, K, L, O, S)</b>			Sector E2
Sampled once per year?	Y	N	Not applicable. DMRs for 2016 and 2017 indicate "No Discharge" or NODI=C for runoff from material storage piles at cement manufacturing facilities
Follow-up requirements if discharge exceeds effluent limit (see 6.2.2.3)?	Y	N	Not applicable

## NPDES Industrial Storm Water Worksheet (MSGP)

<b>Water Quality Based Effluent Limitations</b>				
Does the facility discharge to water quality impaired waters?	Y	N		Stormwater from Las Cruces SMS4 flows to Burn Lake, which was listed for aluminum in 2010. Rio Grande has TMDL for E.coli bacteria. Additional receiving water assessment and impairment information is provided below.
If TMDL exists, does the facility need to monitor?	Y	<input checked="" type="checkbox"/> N		N = Not applicable. No TMDL for aluminum. Facility not anticipated to contribute to E.coli bacteria impairment.
Is the facility monitoring all 303(d) pollutants in the first surface water to which they discharge?	Y	<input checked="" type="checkbox"/> N		No / Not documented. Based on previous monitoring reported under the 2008 MSGP, total aluminum may be detected in discharge.
Does the facility discharge to a CERCLA site?	Y	N		No / Not applicable
Additional monitoring required by EPA?	Y	<input checked="" type="checkbox"/> N		N = No / Not documented.
<b>Reporting (Part 7) Information must be submitted using NeT for NOI, NEC, NOT and Annual Report.</b>				<b>Use NeT-MSGP for NOIs, annual reports, NOTs, and NOEs, and use NetDMR for DMRs.</b>
<u><b>General</b></u>				<b>Notes:</b>
Is facility a new discharger or new source to water quality impaired waters? Has the facility submitted this information to EPA Region 6?	Y	<input checked="" type="checkbox"/> N		N = No / Not documented
If there was a facility exceedance under numeric effluent limitations, was a report submitted to EPA within 30 days?	Y	N		Not applicable
Did the facility submit benchmark or ELG monitoring through NetDMR?	<input checked="" type="checkbox"/> Y	N		
Did the facility submit Annual Reports to EPA through NeT? (Due January 30 of each year)	Y	<input checked="" type="checkbox"/> N		
If follow up monitoring per 6.2.2.3 exceeds a numeric limit, did the facility submit an Exceedance Report (paper) to EPA Region 6 in addition to reporting the monitoring data through NetDMR?	Y	N		Not applicable

## NPDES Industrial Storm Water Worksheet (MSGP)

SWPPP Implementation	
<b>Measures to minimize the exposure of manufacturing, processing, and material storage areas (including loading and unloading, storage, disposal, cleaning, maintenance, and fueling operations) to rain, snow, snowmelt, and runoff</b>	<p><i>(e.g., use grading, berming, or curbing to prevent runoff of contaminated flows and divert run-on away; locate materials, equipment, and activities so that leaks are contained in existing containment and diversion systems; clean up spills and leaks promptly using dry methods (e.g., absorbents) to prevent the discharge of pollutants; use drip pans and absorbents under or around leaky vehicles and equipment or store indoors where feasible; use spill/overflow protection equipment; drain fluids from equipment and vehicles prior to on-site storage or disposal; perform all cleaning operations indoors, under cover, or in bermed areas that prevent runoff and run-on and also that capture any overspray; and ensure that all washwater drains to a proper collection system)</i></p> <p>Walls existed along the north, west and south property boundaries to divert both run-on and run-off. Process water pits existed in the southwest portion of the site.</p> <p>Vehicle maintenance practices described in SWPPP were to include covering and storing parts on pallets. Vehicle maintenance and associated materials were observed outside the enclosed bay area.</p> <p>Drip pans (or bucket) underneath vehicles and equipment was observed. Some oil staining was observed.</p>
<b>Good Housekeeping</b>	<p><i>(e.g., keeping all exposed areas that are potential sources of pollutants clean, using such measures as sweeping at regular intervals, keeping materials orderly and labeled, and storing materials in appropriate containers)</i></p> <p>Good housekeeping controls describe in SWPPP include monthly inspection and weekly clean-up. The facility stored drums and containers, some described as empty and some with openings, at various locations thorough out the site that were not plainly labeled as to content.</p>
<b>Preventative maintenance</b>	<p><i>(e.g., regular inspections, testing, maintenance, and repair of all industrial equipment and systems, and control measures, and back-up practices should a runoff event occur while a control measure is off-line)</i></p> <p>Preventative maintenance included documented regular equipment (e.g., silo, compressor, plant) inspections and repair. Records provided during CEI included equipment maintenance inspections conducted and/or dated 02/13/17, 02/28/2017, 04/26/2017, 06/01/2017, 08/07/2017 and 11/10/2017.</p>



## NPDES Industrial Storm Water Worksheet (MSGP)

SWPPP Implementation	
<b>Spill Prevention and Response</b>	<p><i>(e.g., minimizing the potential for leaks, spills and other releases that may be exposed to storm water and develop plans for effective response to such spills if or when they occur)</i></p> <p>No spills identified. On-site permittee representative stated that there were no spills. See above for observations on oil staining.</p>
<b>Erosion and Sediment Controls</b>	<p><i>(e.g., stabilize exposed areas and contain runoff using structural and/or non-structural control measures to minimize onsite erosion and sedimentation, flow velocity dissipation devices at discharge locations and within outfall channels)</i></p> <p>Stabilization included concrete pavement and buildings in most areas. Retention basins/pits were located in the southwest corner of the site.</p>
<b>Management of Runoff</b>	<p><i>(e.g., divert, infiltrate, reuse, contain, or otherwise reduce storm water runoff, to minimize pollutants in discharges)</i></p> <p>Management of runoff along the eastern property boundary included established vegetation, curb along property boundary fence; and curb cuts and gutter adjacent to vegetated and rock swale. Sand and fine-grained sand had accumulated in the swale.</p>
<b>Salt Storage Piles</b>	<p><i>(e.g., enclose or cover piles appropriate measures (e.g., good housekeeping, diversions, containment) to minimize exposure resulting from adding to or removing materials from the pile)</i></p> <p>Not applicable / no salt storage</p>

## NPDES Industrial Storm Water Worksheet (MSGP)

SWPPP Implementation	
<b>Waste, Garbage and Floatable Debris</b>	<p><i>(e.g., keep exposed areas free of such materials or by intercepting them before they are discharged)</i></p> <p>Site contained waste containers.</p>
<b>Evidence of non-storm water discharges</b>	<p>None documented / none observed.</p> <p>An outside faucet was observed on the southside of the facility office/shop building. No flow or evidence of non-stormwater discharge from the faucet off the property boundary was observed. Faucet (potential source of non-stormwater discharge) was not located on site map.</p>
<b>Dust Generation and Vehicle Tracking of Industrial Materials</b>	<p><i>(minimize generation of dust and off-site tracking of raw, final, or waste materials)</i></p> <p>Dust generation and vehicle tracking controls described in SWPPP include sweeping paved services weekly. Records for inspections and sweeping were not provided / not documented. Within the facility, accumulated sand and fine-grained solids were observed. No windblown dust was observed. Fine-grained solid vehicle tracks were observed at southeast corner entrance at Copper Loop.</p>

## NPDES Industrial Storm Water Worksheet (MSGP)

### Notes on SWPPP Implementation and Sector Specific Requirements

Excerpts from 2015 MSGP, Part 8 Sector E, Sector-Specific Benchmarks and Effluent Limitations

#### Multi-Sector General Permit (MSGP)

**Table 8.E-1.**

Subsector (You may be subject to requirements for more than one sector/subsector)	Parameter	Benchmark Monitoring Concentration
<b>Subsector E1.</b> Clay Product Manufacturers (SIC 3251-3259, 3261-3269)	Total Aluminum	0.75 mg/L
<b>Subsector E2.</b> Concrete and Gypsum Product Manufacturers (SIC 3271-3275)	Total Suspended Solids (TSS)	100 mg/L
	Total Iron	1.0 mg/L

#### **8.E.5 Effluent Limitations Based on Effluent Limitations Guidelines.** (See also Part 6.2.2.1)

Table 8.E-2 identifies effluent limits that apply to the industrial activities described below. Compliance with these limits is to be determined based on discharges from these industrial activities independent of commingling with any other waste streams that may be covered under this permit.

**Table 8.E-2<sup>1</sup>**

Industrial Activity	Parameter	Effluent Limitation
Discharges from material storage piles at cement manufacturing facilities (SIC 3241)	Total Suspended Solids (TSS)	50 mg/L, daily maximum <sup>2</sup>
	pH	6.0 - 9.0 s.u. <sup>2</sup>

<sup>1</sup>Monitor annually.

<sup>2</sup>Any untreated overflow from facilities designed, constructed and operated to treat the volume of runoff from materials storage piles which is associated with a 10-year, 24-hour rainfall event shall not be subject to the pH and TSS limitations (40 CFR 411.32(b)).

# NPDES Industrial Storm Water Worksheet (MSGP)

## Summary of Findings / Further Explanations (See Areas Evaluated during Inspection on EPA Form 3560)

### Permit - Marginal

- **2015 MSGP Deadline:** Reviewed records show that the facility's 2015 MSGP Notice of Intent (NOI) was submitted on 09/03/2015. The NOI submission deadline for operators of industrial activities that were authorized for coverage under the 2008 MSGP was "No later than September 2, 2015." See Table 1-2 of the 2015 MSGP.

### Records / Reports - Unsatisfactory

- **SWPPP/Site Map was not updated.** SWPPP team names/titles and possibly responsibilities; outfall information (e.g., Table 4 of SWPPP pollutants, Section 7 Monitoring); and SWPPP map dated 05/26/2010 had not been updated as noted above. Part 5 of the 2015 MSGP states *"...if you prepared a SWPPP for coverage under a previous version of this NPDES permit, you must review and update the SWPPP to implement all provisions of this permit prior to submitting your NOI."*
- **SWPPP/Summary of Sampling Data, Not Updated:** SWPPP did not include a summary of sampling data (See Part 5.2.3.6 Sampling Data of the 2015 MSGP). For information, a copy of Discharge Monitoring Reports (DMRs) under NMR05H05 and NMR053017 is attached to this CEI report.
- **Corrective Action Report not completed / not documented.** See Part 4.4 of 2015 MSGP.
- **Annual Report due 01/20/2017 (past calendar year) not submitted to USEPA.** See Part 7.5 Annual Report of the 2015 MSGP. More guidance on submitting NetT annual reports is available at <https://epanet.zendesk.com/hc/en-us/articles/235860927>.

### Self-Monitoring Program - Unsatisfactory

- **Employee Training not conducted / not documented as described in SWPPP.** Yearly training described in SWPPP was not conducted according to permittee representative. Records indicated that employee training was conducted in July 2010 (2008 MSGP). See Part 2.1.2.8 Employee Training of the 2015 MSGP.
- **Routine Facility Inspections not completed / not documented.** SWPPP contained a blank "Routine Facility Inspection Report" form which is different than the facility's equipment maintenance inspection form. However, no routine inspections were documented / conducted according to permittee representative. See Part 3.1 Routine Facility Inspections of the 2015 MSGP.
- **Corrective Action not completed / not documented.** Facility's Visual Assessment Report dated 10/06/2017 (4th quarter 2017) indicating light brown color and some dirt in the sample. See Part 4.1 Corrective Actions, Conditions Requiring SWPPP Review and Revision to Ensure Effluent Limits are Met of the 2015 MSGP.
- **Water Quality Based Effluent Limitations monitoring not conducted / not documented.** The Permittee's records for submitting the NOI indicated discharges to Burn Lake, but incorrectly indicated that the receiving water is not listed / is not in need of a TMDL. Aluminum was not a pollutant pre-populated in the Facility's electronic DMR in USEPA's NetDMR system. Reasons for not conducting aluminum monitoring beginning in the 1st Qtr following 09/02/2015 was not documented in SWPPP See Part 6.2.4.1 (Permittees Required to Monitor Discharges to Impaired Waters) of the 2015 MSGP. Permittee representatives can contact USEPA for more information to determine if the NOI should be updated/amended and/or if changes to NetDMR are required.
- **Written Procedures in SWPPP/pH:** As noted above, no discharge / monitoring for pH effluent limitation was reported under the 2015 MSGP. Permittee has used contract laboratory Alamo Analytical Laboratories, LTD, El Paso, Texas, 915-599-2182 to monitor for TSS, Iron and pH. The contract laboratory was not inspected.

## **NPDES Industrial Storm Water Worksheet (MSGP)**

### **Summary Continued –**

Written procedures in SWPPP would not ensure that pH monitoring would meet USEPA approved methods in 40 CFR Part 136 Table II that requires analysis (holding time) within 15 minutes of collection. On-site monitoring for pH would be required.

### **Facility Site Review – Marginal**

- Practices described in SWPPP and/or additional measures (e.g., minimize exposure, good housekeeping from outside equipment and vehicle maintenance activities, removal of oil staining on paved services from vehicle maintenance, as practical, additional sweeping or vacuum of paved surfaces of the site or other methods) to minimize the potential discharge of these materials in stormwater appeared needed. Future maintenance (removal of accumulated sand and fine-grained sand) may be needed in the rock and vegetated swale along the eastern property boundary. See attached Photo Documentation.

# NPDES Industrial Storm Water Worksheet (MSGP)

## Receiving Water Tier 1 Impairment Information

Rio Grande (NM192 bridge W of Mesquite to Picacho Bridge)			IR CATEGORY	LOCATION DESCRIPTION	
			1	13030102 - El Paso-Las Cruces	
AU ID	WQS REF	WATER TYPE	SIZE	ASSESSED	MONITORING SCHEDULE
NM-2101_03	20.6.4.101	RIVER	13.3 MILES	2014	2021
USE	ATTAINMENT	CAUSE(S)	FIRST LISTED	TMDL DATE	PROBABLE SOURCE(S)
IRR	Fully Supporting				
LW	Fully Supporting				
MWWAL	Fully Supporting				
PC	Fully Supporting				
WH	Fully Supporting				
AU Comment: TMDL for E. coli.					
<b>HUC: 13030102 El Paso-Las Cruces</b>					
Burn Lake (Dona Ana)			IR CATEGORY	LOCATION DESCRIPTION	
			5/5A	13030102 - El Paso-Las Cruces	
AU ID	WQS REF	WATER TYPE	SIZE	ASSESSED	MONITORING SCHEDULE
NM-9000.B_024	20.6.4.99	FRESHWATER RESERVOIR	22.68 ACRES	2010	2021
USE	ATTAINMENT	CAUSE(S)	FIRST LISTED	TMDL DATE	PROBABLE SOURCE(S)
LW	Fully Supporting				<ul style="list-style-type: none"> <li>Source Unknown</li> </ul>
PC	Fully Supporting				
WWAL	Not Supporting	Aluminum	2010	2017 (est.)	
WH	Fully Supporting				
AU Comment: None.					
Rio Grande (Anthony Bridge to NM192 bridge W of Mesquite)			IR CATEGORY	LOCATION DESCRIPTION	
			4A	13030102 - El Paso-Las Cruces	
AU ID	WQS REF	WATER TYPE	SIZE	ASSESSED	MONITORING SCHEDULE
NM-2101_01	20.6.4.101	RIVER	13.32 MILES	2014	2021
USE	ATTAINMENT	CAUSE(S)	FIRST LISTED	TMDL DATE	PROBABLE SOURCE(S)
IRR	Fully Supporting				<ul style="list-style-type: none"> <li>Municipal Point Source Discharges</li> <li>Waterfowl</li> <li>On-site Treatment Systems (Septic)</li> <li>Confined Animal Feeding Operations (CAFOs)</li> <li>Wildlife Other than Waterfowl</li> <li>Wastes from Pets</li> <li>Municipal (High Density Area)</li> <li>Impervious Surface/Parking Lot Runoff</li> <li>Rangeland Grazing</li> </ul>
LW	Fully Supporting				
MWWAL	Fully Supporting				
PC	Not Supporting	E. coli	2006	6/11/2007	
WH	Fully Supporting				
AU Comment: TMDL for E. coli.					

**Source:** NMED 2016 - 2018 State of New Mexico Clean Water Act §303(d)/§305(b) Integrated List at <https://www.env.nm.gov/swqb/303d-305b/2016-2018/documents/EPA-APPROVED2016APPA--IntegratedList.pdf>.

## **ATTACHMENTS**

**Attachment 1 – Photo Documentation**

**Attachment 2 – Copies of DMRs under 2008 MSGP**

**Attachment 3 - Summary of DMRs under 2015 MSGP**

## **Attachment 1 – Photo Documentation**



**NMED/SWQB  
Official Photograph Log  
Photo # 1**

Photographer: Erin S. Trujillo

Date: 11/15/2017

Time: 1541 hours (corrected)

City/County: Las Cruces / Dona Ana County

State: New Mexico

Location: NMR053017, American Redi-Mix, LLC, Copper Loop Batch Plant, 1860 Copper Loop, Las Cruces, New Mexico 88007

Subject: At southeast corner entrance looking north, arrow shows location of shallow gutter along Copper Loop Street.



**NMED/SWQB  
Official Photograph Log  
Photo # 2**

Photographer: Erin S. Trujillo	Date: 11/15/2017	Time: 1541 hours (corrected)
--------------------------------	------------------	------------------------------

City/County: Las Cruces / Dona Ana County	State: New Mexico
---	-------------------

Location: NMR053017, American Redi-Mix, LLC, Copper Loop Batch Plant, 1860 Copper Loop, Las Cruces, New Mexico 88007

Subject: At southeast corner entrance, looking east at Copper Loop, arrow shows location of fine-grained solids that appear to have been tracked out from facility.





**NMED/SWQB  
Official Photograph Log  
Photo # 3**

Photographer: Erin S. Trujillo	Date: 11/15/2017	Time: 1548 hours (corrected)
City/County: Las Cruces / Dona Ana County		State: New Mexico
Location: NMR053017, American Redi-Mix, LLC, Copper Loop Batch Plant, 1860 Copper Loop, Las Cruces, New Mexico 88007		
Subject: Example of oil staining around vehicles and equipment storage area		



**NMED/SWQB  
Official Photograph Log  
Photo # 4**

Photographer: Erin S. Trujillo	Date: 11/15/2017	Time: 1549 hours (corrected)
--------------------------------	------------------	------------------------------

City/County: Las Cruces / Dona Ana County	State: New Mexico
---	-------------------

Location: NMR053017, American Redi-Mix, LLC, Copper Loop Batch Plant, 1860 Copper Loop, Las Cruces, New Mexico 88007

Subject: Example of opened drum at site (in this case labeled with previous contents). It was not determined if drum had residual oil or had been cleaned.





**NMED/SWQB  
Official Photograph Log  
Photo # 5**

Photographer: Erin S. Trujillo

Date: 11/15/2017

Time: 1550 hours (corrected)

City/County: Las Cruces / Dona Ana County

State: New Mexico

Location: NMR053017, American Redi-Mix, LLC, Copper Loop Batch Plant, 1860 Copper Loop, Las Cruces, New Mexico 88007

Subject: Arrow points to example accumulation of sand and fine-grained solids at eastern facility boundary. Sweeping appears needed.



**NMED/SWQB  
Official Photograph Log  
Photo # 6**

Photographer: Erin S. Trujillo

Date: 11/15/2017

Time: 1552 hours (corrected)

City/County: Las Cruces / Dona Ana County

State: New Mexico

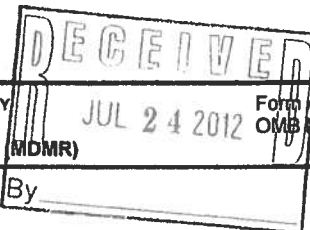
Location: NMR053017, American Redi-Mix, LLC, Copper Loop Batch Plant, 1860 Copper Loop, Las Cruces, New Mexico 88007

Subject: Arrow points to example accumulation of sand and fine-grained solids in gutter and paved areas at facility. Sweeping appears needed. Accumulated solids in rock and vegetated swale may need to be removed to maintain drainage. Future inspection of swale area appears needed.



**Attachment 2 – Copies of DMRs under 2008 MSGP**

AUG 01 2012



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.  
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).  
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).  
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).  
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).  
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: **NMR05H405**

Note: Read instructions before completing this Form.

B. Facility Information

1. Facility Name: **Copper Loop Batch Plant**

2. Facility Location:

a. Street: **1860 Copper Loop**

b. City: **Las Cruces**

c. State: **NM** d. Zip Code: **88005**

3. Additional Facility Information (Optional):

Contact Name: **Amy Castillo**

Email: **Armlilc@qwestoffice.net**

Phone: **575-528-0600** Ext.

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by:

Organization:

Email:

Phone:  -  -  Ext.

C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:

☐ Quarter 1 (April 1 – June 30)

☒ Quarter 1: From **06/31** To **07/31**

☐ Quarter 2 (July 1 – September 30)

☐ Quarter 2: From **08/01** To **08/31**

☐ Quarter 3 (October 1 – December 31)

☐ Quarter 3: From **09/01** To **09/30**

☐ Quarter 4 (January 1 – March 31)

☐ Quarter 4: From **10/01** To **12/31**

2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2.a.) ☒ No (Skip to Section D)

2.a. What is the hardness level of the receiving water?  mg/L

D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? **02** List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls (List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable))	3.C. No Discharge?
Outfall 1	Not Applicable	<input type="checkbox"/>
Outfall 2	Not Applicable	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table





UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

E. Monitoring Information

Note: Make additional copies of this form as necessary.

1. Permit Tracking Number: NMR05H405

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 01

2.b. Rainfall amount (inches): 00.5

2.c. Time since previous measurable storm event (days): 060


3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
Outfall #1	QBM	Total Suspended Solids	35	mg/L	Not Applicable	7/6/2012	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Iron	4.44	mg/L	Not Applicable	7/6/2012	<input checked="" type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Suspended Solids	35	mg/L	Not Applicable	7/6/2012	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Iron	4.44	mg/L	Not Applicable	7/6/2012	<input checked="" type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

I will continue to sweep daily around the whole perimeter to try & reduce Iron concentration

F. Certification

Amy Castillo	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		7/23/12
Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent		Signature of Principal Executive Officer or Authorized Agent	Date
Email of Principal Executive Officer or Authorized Agent:	<u>A r m i l c @ q w e s t o f f i c e . n e t</u>		

OCT 01 2012

SEP 21 2012

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)Form Approved.  
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).  
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).  
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).  
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).  
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: **NMR05H405**

Note: Read instructions before completing this Form.

## B. Facility Information

1. Facility Name: **Copper Loop Batch Plant**

2. Facility Location:

a. Street: **1860 Copper Loop**b. City: **Las Cruces**c. State: **NM** d. Zip Code: **88005**

3. Additional Facility Information (Optional):

Contact Name: **Amy Castillio**Email: **Armilic@westoffice.net**Phone: **575-528-0600** Ext. 

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by: Organization: Email: Phone:  -  -  Ext. 

## C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:☐ Quarter 1 (April 1 – June 30)☐ Quarter 1: From **06/31** To **07/31**☐ Quarter 2 (July 1 – September 30)☒ Quarter 2: From **08/01** To **08/31**☐ Quarter 3 (October 1 – December 31)☐ Quarter 3: From **09/01** To **09/30**☐ Quarter 4 (January 1 – March 31)☐ Quarter 4: From **10/01** To **12/31**2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2.a.) ☒ No (Skip to Section D)2a. What is the hardness level of the receiving water?  mg/L

## D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? **02** List name of outfall(s) required to be monitored in table below.2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls [List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable)]	3.C. No Discharge?
Outfall 1	Not Applicable	<input type="checkbox"/>
Outfall 2	Not Applicable	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

E. Monitoring Information

Note: Make additional copies of this form as necessary.

1. Permit Tracking Number: NMR05H405

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 01 2.b. Rainfall amount (inches): 0.4 2.c. Time since previous measurable storm event (days): 047

3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
Outfall #1	QBM, ELG	Total Suspended Solids	4	mg/L	Not Applicable	8/23/2012	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM, ELG	Total Iron	.6	mg/L	Not Applicable	8/23/2012	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM, ELG	Total Suspended Solids	4	mg/L	Not Applicable	8/23/2012	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM, ELG	Total Iron	.49	mg/L	Not Applicable	8/23/2012	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) -Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

F. Certification

Amy Castillo	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		
Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent		Signature of Principal Executive Officer or Authorized Agent	Date
Email of Principal Executive Officer or Authorized Agent:	Armlilc@qwestoffice.net		

NOV 14 2012



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.  
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).  
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).  
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).  
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).  
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: **NMR05H405**

Note: Read instructions before completing this Form.

B. Facility Information

1. Facility Name: **Copper Loop Batch Plant**

2. Facility Location:

a. Street: **1860 Copper Loop**

b. City: **Las Cruces**

c. State: **NM** d. Zip Code: **88005**

3. Additional Facility Information (Optional):

Contact Name: **Amy Castillo**

Email: **Armilic@qwestoffice.net**

Phone: **575-528-0600** Ext.

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by:

Organization:

Email:

Phone:  -  -  Ext.

C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:

☐ Quarter 1 (April 1 – June 30)

☐ Quarter 1: From **06/31** To **07/31**

☐ Quarter 2 (July 1 – September 30)

☐ Quarter 2: From **08/01** To **08/31**

☐ Quarter 3 (October 1 – December 31)

☒ Quarter 3: From **09/01** To **09/30**

☐ Quarter 4 (January 1 – March 31)

☐ Quarter 4: From **10/01** To **12/31**

2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2.a.) ☒ No (Skip to Section D)

2.a. What is the hardness level of the receiving water?  mg/L

D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? **02** List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls [List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable)]	3.C. No Discharge?
Outfall 1	Not Applicable	<input type="checkbox"/>
Outfall 2	Not Applicable	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

E. Monitoring Information

Note: Make additional copies of this form as necessary.

1. Permit Tracking Number: NMR05H405

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 01

2.b. Rainfall amount (inches): 00.6

2.c. Time since previous measurable storm event (days): 035


3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
Outfall #1	QBM	Total Suspended Solids	35	mg/L	Not Applicable	9/28/2012	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Iron	2.17	mg/L	Not Applicable	9/28/2012	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Suspended Solids	19	mg/L	Not Applicable	9/28/2012	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Iron	.99	mg/L	Not Applicable	9/28/2012	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

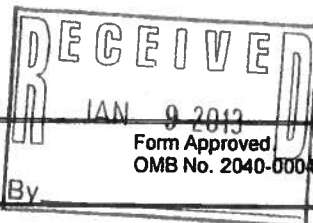
Better house-keeping to keep dust and iron to a minimum.

F. Certification

Amy Castillo	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		10-29-12
Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent		Signature of Principal Executive Officer or Authorized Agent	Date
Email of Principal Executive Officer or Authorized Agent:	<u>Armlilc@qwestoffice.net</u>		



JAN 16 2013



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).  
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).  
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).  
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).  
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: NMR05H405

Note: Read instructions before completing this Form.

## B. Facility Information

1. Facility Name: Copper Loop Batch Plant

2. Facility Location:

a. Street: 1860 Copper Loopb. City: Las Crucesc. State: NM d. Zip Code: 88005

3. Additional Facility Information (Optional):

Contact Name: Amy CastilloEmail: Armillc@westoffice.netPhone: 575-528-0600 Ext. 

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by: Organization: Email: Phone:  -  -  Ext. 

## C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:☐ Quarter 1 (April 1 – June 30)☐ Quarter 1: From 06/31 To 07/31☐ Quarter 2 (July 1 – September 30)☐ Quarter 2: From 08/01 To 08/31☐ Quarter 3 (October 1 – December 31)☐ Quarter 3: From 09/01 To 09/30☐ Quarter 4 (January 1 – March 31)☒ Quarter 4: From 10/01 To 12/312. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2 a.) ☒ No (Skip to Section D)2a. What is the hardness level of the receiving water?  mg/L

## D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? 02 List name of outfall(s) required to be monitored in table below.2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls [List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable)]	3.C. No Discharge?
Outfall 1	Not Applicable	<input type="checkbox"/>
Outfall 2	Not Applicable	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table



**Note: Make additional copies of this form as necessary.**

2.c. Time since previous measurable storm event (days): 0 | 7 | 7

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) -Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

1-8-12

Date \_\_\_\_\_

MSGP Industrial Discharge Monitoring Report (MDMR) Form

AUG 26 2013

Received: Unknown



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.  
OMB No. 2040-0004

## Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).  
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).  
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).  
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).  
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F)

A. Permit Tracking Number: NMR05H405

Note: Read instructions before completing this Form.

## B. Facility Information

1. Facility Name: Copper Loop Batch Plant

2. Facility Location:

a. Street: 1860 Copper Loop

b. City: Las Cruces

c. State: NM d. Zip Code 88005

3. Additional Facility Information (Optional):

Contact Name: Amy Castillo

Email: armilic@qwestoffice.net

Phone: 575-528-0600 Ext.

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by:

Organization:

Email:

Phone: - Ext.

## C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:☐ Quarter 1 (April 1 – June 30)☒ Quarter 1: From 06/01 To 07/31☐ Quarter 2 (July 1 – September 30)☐ Quarter 2: From 08/01 To 08/31☐ Quarter 3 (October 1 – December 31)☐ Quarter 3: From 09/01 To 09/30☐ Quarter 4 (January 1 – March 31)☐ Quarter 4: From 10/01 To 12/312. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2 a) ☒ No (Skip to Section D)

2a. What is the hardness level of the receiving water? mg/L

## D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? 02 List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2 a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A Monitored Outfall Name*	3.B. Substantially Identical Outfalls (List name(s) of outfall(s) substantially identical to outfall in 3 A (if applicable))	3 C. No Discharge?
Outfall 1	Not Applicable	<input type="checkbox"/>
Outfall 2	Not Applicable	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table





UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

E. Monitoring Information

Note: Make additional copies of this form as necessary.

1. Permit Tracking Number: NMR05H405

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 01

2.b. Rainfall amount (inches): 00.3

2.c. Time since previous measurable storm event (days): 081

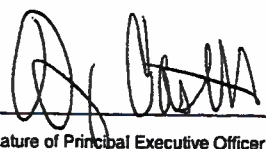
3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
Outfall #1	QBM	Total Suspended Solids	136	mg/L	Not Applicable	06/30/2013	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Iron	1.66	mg/L	Not Applicable	06/30/2013	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Suspended Solids	134	mg/L	Not Applicable	06/30/2013	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Iron	1.56	mg/L	Not Applicable	06/30/2013	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

Extremely windy.

F. Certification

Amy Castillo	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		8/14/13
Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent			
Email of Principal Executive Officer or Authorized Agent: <u>Armlilc@qwestoffice.net</u>		Signature of Principal Executive Officer or Authorized Agent	Date

OCT 21 2013

SEP 30 2013



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.  
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections)  
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).  
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).  
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4)  
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: **NMR05H405**

Note: Read instructions before completing this Form.

B. Facility Information

1. Facility Name: **Copper Loop Batch Plant**

2. Facility Location:

a. Street: **1860 Copper Loop**

b. City: **Las Cruces**

c. State: **NM** d. Zip Code: **88005**

3. Additional Facility Information (Optional):

Contact Name: **Amy Castillo**

Email: **Armlilc@qwestoffice.net**

Phone: **575-528-0600** Ext.

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by:

Organization:

Email:

Phone:  -  -  Ext.

C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:

☐ Quarter 1 (April 1 – June 30)

☐ Quarter 1: From **06/01** To **07/31**

☐ Quarter 2 (July 1 – September 30)

☒ Quarter 2: From **08/01** To **08/31**

☐ Quarter 3 (October 1 – December 31)

☐ Quarter 3: From **09/01** To **09/30**

☐ Quarter 4 (January 1 – March 31)

☐ Quarter 4: From **10/01** To **12/31**

2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2.a.) ☒ No (Skip to Section D)

2.a. What is the hardness level of the receiving water?  mg/L

D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? **02** List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3 B. Substantially Identical Outfalls [List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable)]	3.C. No Discharge?
Outfall 1	Not Applicable	<input type="checkbox"/>
Outfall 2	Not Applicable	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

E. Monitoring Information

1. Permit Tracking Number: NMR05H405

Note: Make additional copies of this form as necessary.

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 01

2.b. Rainfall amount (inches): 0.03

2.c. Time since previous measurable storm event (days): 021

3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
Outfall #1	QBM	Total Suspended Solids	59	mg/L	Not Applicable	08/12/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Iron	.37	mg/L	Not Applicable	08/12/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Aluminum	.52	mg/L	Not Applicable	08/12/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	PH	6.98	PH units	Not Applicable	08/12/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Suspended Solids	131	mg/L	Not Applicable	08/12/2013	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Iron	1.18	mg/L	Not Applicable	08/12/2013	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Aluminum	1.38	mg/L	Not Applicable	08/12/2013	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	PH	6.60	PH units	Not Applicable	08/12/2013	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

F. Certification

Amy Castillo

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent

Email of Principal Executive Officer or Authorized Agent:

Armillc@qwestoffice.net

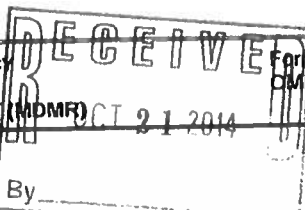
Signature of Principal Executive Officer or Authorized Agent

Date

9/26/13



OCT 22 2014

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)Form Approved.  
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).
- ☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).
- ☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).
- ☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).
- ☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: NMR05H405

Note: Read instructions before completing this Form.

## B. Facility Information

1. Facility Name: Copper Loop Batch Plant

2. Facility Location:

a. Street: 1860 Copper Loop

b. City: Las Cruces

c. State: NM d. Zip Code: 88005

3. Additional Facility Information (Optional)

Contact Name: Amy Castillo

Email: armillc@qwestoffice.net

Phone: 575-528-0600 Ext.

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by:

Organization:

Email:

Phone: - Ext.

## C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:☐ Quarter 1 (April 1 – June 30)☒ Quarter 1: From 06/01 To 07/31☐ Quarter 2 (July 1 – September 30)☐ Quarter 2: From 08/01 To 08/31☐ Quarter 3 (October 1 – December 31)☐ Quarter 3: From 09/01 To 09/30☐ Quarter 4 (January 1 – March 31)☐ Quarter 4: From 10/01 To 12/312. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2.a.) ☒ No (Skip to Section D)

2a. What is the hardness level of the receiving water? mg/L

## D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? 02 List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls [List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable)]	3.C. No Discharge?
Outfall 1	Not Applicable	<input type="checkbox"/>
Outfall 2	Not Applicable	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table.





UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

Note: Make additional copies of this form as necessary.

E. Monitoring Information

1. Permit Tracking Number: NMR05H405

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 01 2.b. Rainfall amount (inches): 00.5 2.c. Time since previous measurable storm event (days): 019

3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
Outfall #1	QBM	Total Suspended Solids	32	mg/L	Not Applicable	9/4/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Iron	.15	mg/L	Not Applicable	9/4/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Aluminum	.2	mg/L	Not Applicable	9/4/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	PH	6.31	PH units	Not Applicable	9/4/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Suspended Solids	26	mg/L	Not Applicable	9/4/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Iron	.2	mg/L	Not Applicable	9/4/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Aluminum	.28	mg/L	Not Applicable	9/4/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	PH	6.25	PH units	Not Applicable	9/4/2014	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

F. Certification

Amy Castillo

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent

Signature of Principal Executive Officer or Authorized Agent

Date

Email of Principal Executive Officer or Authorized Agent:

Armlilc@qwestoffice.net

NOV 13 2013

NOV 12 2013



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.  
OMB No. 2040-0004

## Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).  
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C 1, D, and F).  
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).  
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).  
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: **NMR05H405**

Note: Read instructions before completing this Form.

## B. Facility Information

1. Facility Name: **Copper Loop Batch Plant**

2. Facility Location:

a. Street: **1860 Copper Loop**b. City: **Las Cruces**c. State: **NM** d. Zip Code: **88005**

3. Additional Facility Information (Optional)

Contact Name: **Amy Castillo**Email: **armilic@westoffice.net**Phone: **575-528-0600** Ext. 

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by: Organization: Email: Phone:  -  -  Ext. 

## C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:
☐ Quarter 1 (April 1 – June 30)☐ Quarter 1: From **06/01** To **07/31**☐ Quarter 2 (July 1 – September 30)☐ Quarter 2: From **08/01** To **08/31**☐ Quarter 3 (October 1 – December 31)☒ Quarter 3: From **09/01** To **09/30**☐ Quarter 4 (January 1 – March 31)☐ Quarter 4: From **10/01** To **12/31**2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2.a.) ☒ No (Skip to Section D)2a. What is the hardness level of the receiving water?  mg/L

## D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? **02** List name of outfall(s) required to be monitored in table below.2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls [List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable)]	3.C. No Discharge?
Outfall 1	Not Applicable	<input type="checkbox"/>
Outfall 2	Not Applicable	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

E. Monitoring Information

Note: Make additional copies of this form as necessary.

1. Permit Tracking Number: NMR05H405

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 01

2.b. Rainfall amount (inches): 00.4


2.c. Time since previous measurable storm event (days): 008

3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
Outfall #1	QBM	Total Suspended Solids	67	mg/L	Not Applicable	9/19/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Iron	.94	mg/L	Not Applicable	9/19/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Aluminum	1.11	mg/L	Not Applicable	9/19/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	PH	6.26	PH units	Not Applicable	9/19/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Suspended Solids	80	mg/L	Not Applicable	9/19/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Iron	.6	mg/L	Not Applicable	9/19/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Aluminum	.64	mg/L	Not Applicable	9/19/2013	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	PH	6.21	PH units	Not Applicable	9/19/2013	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) -Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

F. Certification

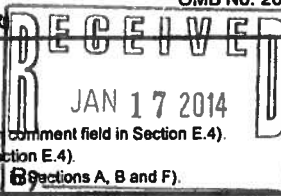
Amy Castillo	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		11/1/13
Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent		Signature of Principal Executive Officer or Authorized Agent	
Email of Principal Executive Officer or Authorized Agent: Armlilc@qwestoffice.net			

JAN 27 2014



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved.  
OMB No. 2040-0004



Reason(s) for Submission (Check all that apply):

- ☐ Submitting monitoring data (Fill in all Sections).  
☒ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).  
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).  
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).  
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: NMR05H405

Note: Read instructions before completing this Form.

B. Facility Information

1. Facility Name: Copper Loop Batch Plant

2. Facility Location:

a. Street: 1860 Copper Loop

b. City: Las Cruces

c. State: NM d. Zip Code: 88005

3. Additional Facility Information (Optional):

Contact Name: Amy Castillio

Email: Armillc@westoffice.net

Phone: 575-528-0600 Ext.

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by:

Organization:

Email:

Phone:  -  -  Ext.

C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:

☐ Quarter 1 (April 1 – June 30)

☐ Quarter 1: From 06/01 To 07/31

☐ Quarter 2 (July 1 – September 30)

☐ Quarter 2: From 08/01 To 08/31

☐ Quarter 3 (October 1 – December 31)

☐ Quarter 3: From 09/01 To 09/30

☐ Quarter 4 (January 1 – March 31)

☒ Quarter 4: From 10/01 To 12/31

2. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2 a.) ☒ No (Skip to Section D)

2.a. What is the hardness level of the receiving water?  mg/L

D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? 02 List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls (List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable))	3.C. No Discharge?
Outfall 1	Not Applicable	<input checked="" type="checkbox"/>
Outfall 2	Not Applicable	<input checked="" type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table



### E. Monitoring Information

1. Permit Tracking Number: NMR05H405

2. Nature of Discharge: ☐ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 00 2.b. Rainfall amount (inches): 00.0 2.c. Time since previous measurable storm event (days): 000

[illegible]

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) -Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

### F. Certification

**Amy Castillo**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Principal Executive Officer or Authorized Agent

Date \_\_\_\_\_

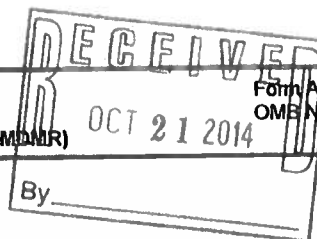
Typed or Printed Name/Title of Principal Executive  
Officer or Authorized Agent

Email of Principal Executive Officer or Authorized Agent:

Armlilc@qwestoffice.net



OCT 22 2014

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)Form Approved.  
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).  
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).  
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).  
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).  
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: NMR05H405

Note: Read instructions before completing this Form.

## B. Facility Information

1. Facility Name: Copper Loop Batch Plant

2. Facility Location:

a. Street: 1860 Copper Loop

b. City: Las Cruces

c. State: NM d. Zip Code: 88005

3. Additional Facility Information (Optional):

Contact Name: Amy Castillio

Email: Armilic@westoffice.net

Phone: 575-528-0600 Ext.

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by:

Organization:

Email:

Phone: - Ext.

## C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate for which alternative monitoring period you are reporting monitoring data:☐ Quarter 1 (April 1 – June 30)☐ Quarter 1: From 06 / 01 To 07 / 31☐ Quarter 2 (July 1 – September 30)☒ Quarter 2: From 08 / 01 To 08 / 31☐ Quarter 3 (October 1 – December 31)☐ Quarter 3: From 09 / 01 To 09 / 30☐ Quarter 4 (January 1 – March 31)☐ Quarter 4: From 10 / 01 To 12 / 312. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2.a.) ☒ No (Skip to Section D)

2a. What is the hardness level of the receiving water? mg/L

## D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? 02 List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls (List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable))	3.C. No Discharge?
Outfall 1	Not Applicable	<input type="checkbox"/>
Outfall 2	Not Applicable	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)

Form Approved. OMB No. 2040-0004

Note: Make additional copies of this form as necessary.

E. Monitoring Information

1. Permit Tracking Number: NMR05H405

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 01 2.b. Rainfall amount (inches): 00.7 2.c. Time since previous measurable storm event (days): 011

3.a. Outfall Name	3.b. Monitoring Type (QBM, ELG, S/T, I, O)*	3.c. Parameter	3.d. Quality or Concentration	3.e. Units	3.f. Results Description	3.g. Collection Date	3.h. Exceedance due to natural background pollutant levels	3.i. No further pollutant reductions achievable?
Outfall #1	QBM	Total Suspended Solids	24	mg/L	Not Applicable	9/15/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Iron	.42	mg/L	Not Applicable	9/15/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	Total Aluminum	.15	mg/L	Not Applicable	9/15/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #1	QBM	PH	6.42	PH units	Not Applicable	9/15/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Suspended Solids	13	mg/L	Not Applicable	9/15/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Iron	.12	mg/L	Not Applicable	9/15/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	Total Aluminum	.15	mg/L	Not Applicable	9/15/2014	<input type="checkbox"/>	<input type="checkbox"/>
Outfall #2	QBM	PH	5.6	PH units	Not Applicable	9/15/2014	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

F. Certification

Amy Castillo

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Typed or Printed Name/Title of Principal Executive Officer or Authorized Agent

Signature of Principal Executive Officer or Authorized Agent

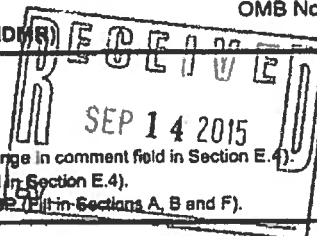
Date

Email of Principal Executive Officer or Authorized Agent:

Arml1c@qwestoffice.net



SEP 16 2015

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
WASHINGTON, DC 20460  
MSGP INDUSTRIAL DISCHARGE MONITORING REPORT (MDMR)Form Approved  
OMB No. 2040-0004

Reason(s) for Submission (Check all that apply):

- ☒ Submitting monitoring data (Fill in all Sections).  
☐ Reporting no discharge for all outfalls for this monitoring period (Fill in Sections A, B, C.1, D, and F).  
☐ Reporting that your site status has changed to inactive and unstaffed (Fill in Sections A, B, F and include date of status change in comment field in Section E.4).  
☐ Reporting that your site status has changed to active (Fill in all Sections and include date of status change in comment field in Section E.4).  
☐ Reporting that no further pollutant reductions are achievable for all outfalls and for all pollutants via Part 6.2.1.2 of the MSGP (Fill in Sections A, B and F).

A. Permit Tracking Number: NMR05H405

Note: Read instructions before completing this Form.

## B. Facility Information

1. Facility Name: Copper Loop Batch Plant

2. Facility Location:

a. Street: 1860 Copper Loop

b. City: Las Cruces

c. State: NM d. Zip Code: 88005

3. Additional Facility Information (Optional):

Contact Name: Amy Castillo

Email: armilic@westoffice.net

Phone: 575-528-0600 Ext.

4. MDMR Preparer (Complete if MDMR was prepared by someone other than the person signing the certification in Section F)

Prepared by:

Organization:

Email:

Phone: - - Ext.

## C. Discharge Information

1. Identify monitoring period:

☒ Check here if proposing alternative monitoring periods due to irregular stormwater runoff. Identify alternative monitoring schedule and indicate which alternative monitoring period you are reporting monitoring data:☐ Quarter 1 (April 1 – June 30)☒ Quarter 1: From 06 / 01 To 07 / 31☐ Quarter 2 (July 1 – September 30)☐ Quarter 2: From 08 / 01 To 08 / 31☐ Quarter 3 (October 1 – December 31)☐ Quarter 3: From 09 / 01 To 09 / 30☐ Quarter 4 (January 1 – March 31)☐ Quarter 4: From 10 / 01 To 12 / 312. Are you required to monitor for cadmium, copper, chromium, lead, nickel, silver, or zinc? ☐ Yes (Complete line item 2.a.) ☒ No (Skip to Section D)

2a. What is the hardness level of the receiving water? mg/L

## D. Outfall Information

1. How many outfall(s) are identified in your SWPPP? 01 List name of outfall(s) required to be monitored in table below.

2. Do any of your outfalls discharge substantially identical effluents? ☐ YES ☒ NO

2.a. If yes, for each monitored outfall, indicate outfall names that are substantially identical in table below.

3.A. Monitored Outfall Name*	3.B. Substantially Identical Outfalls (List name(s) of outfall(s) substantially identical to outfall in 3.A. (if applicable))	3.C. No Discharge?
Outfall 1	Not Applicable	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

\*Reference attachment if additional space needed to complete the table.



### E. Monitoring Information

**Note: Make additional copies of this form as necessary.**

1. Permit Tracking Number: NMR05H405

2. Nature of Discharge: ☒ Rainfall (Complete line items 2.a., 2.b., & 2.c.) ☐ Snowmelt

2.a. Duration of the rainfall event (hours): 01 2.b. Rainfall amount (inches): 00.3 2.c. Time since previous measurable storm event (days): 012

[illegible]

\* (QBM) - Quarterly benchmark monitoring; (ELG) - Annual effluent limitations guidelines monitoring; (S/T) - State- or Tribal-specific monitoring; (I) - Impaired waters monitoring; (O) - Other monitoring as required by EPA

4. Comment and/or Explanation of Any Violations (Reference all attachments here)

### F. Certification

**Amy Castillo**

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Principal Executive Officer or Authorized Agent

Date \_\_\_\_\_

Email of Principal Executive Officer or Authorized Agent:

A r m i l l c @ q w e s t o f f i c e . n e t

### **Attachment 3 - Summary of DMRs under 2015 MSGP**

# DMR Summary

## Permit NMR053017

Permit Name	Version Nbr	Curr. Major Minor Status	Issue Date	Effective Date	Expiration Date
American Redi-Mix	0	Minor	9/3/15	9/3/15	6/3/20

### Version # 0

#### Outfall 0012E

##### 00400 pH / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
6/1/15	6/3/20	GRAB	Annual

Limit		
Limit Unit Desc	Standard Units	Standard Units
Statistical Base	MINIMUM	MAXIMUM
Limit Value	6	9
DMR Values		
8/31/16	NODI=C	NODI=C
8/31/17	NODI=C	NODI=C

##### 00530 Solids, total suspended / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
6/1/15	6/3/20	GRAB	Annual

Limit	
Limit Unit Desc	Milligrams per Liter
Statistical Base	DAILY MX
Limit Value	50
DMR Values	
8/31/16	NODI=C
8/31/17	NODI=C

#### Outfall 001E2

##### 00530 Solids, total suspended / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
6/1/15	6/3/20	GRAB	Quarterly

Limit	
Limit Unit Desc	Milligrams per Liter
Statistical Base	MAXIMUM
Limit Value	100
DMR Values	
12/31/15	NODI=C
3/31/16	NODI=C
6/30/16	13
9/30/16	13

# DMR Summary

## Permit NMR053017

Version # 0

### Outfall 001E2

#### 00530 Solids, total suspended / Location 1 / Season 0 / Base

DMR Values	
12/31/16	NODI=C
3/31/17	NODI=C
6/30/17	NODI=C
9/30/17	13.5

#### 01045 Iron, total [as Fe] / Location 1 / Season 0 / Base

Limit Start Date	Limit End Date	Sample Type	Frequency of Analysis
6/1/15	6/3/20	GRAB	Quarterly

Limit	
Limit Unit Desc	Milligrams per Liter
Statistical Base	MAXIMUM
Limit Value	1
DMR Values	
12/31/15	NODI=C
3/31/16	NODI=C
6/30/16	.16
9/30/16	.16
12/31/16	NODI=C
3/31/17	NODI=C
6/30/17	NODI=C
9/30/17	.03